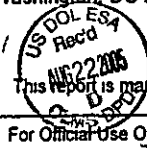


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U **10777**

2 Fiscal Year Covered From

1 / 1 / 2004 Through **12 / 31 / 2004**

3 Name and address of person filing

Name **James Homer**

P O Box Bldg Room No if any

Street **23293 Summit rd**

City **Los Gatos**

State **Ca** ZIP Code + 4 **95033**

4 Name file number and address of labor organization

Name **LIUNA Laborers Local 270**

Labor Organization File Number **022-527**

P O Box Building and Room Number if any

Street **509 Emory st**

City **San Jose**

State **ca** ZIP Code + 4 **95110**

5 Position in labor organization

Business Manager

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent

6 Name and address of Employer (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

7 a. Nature of Interest, Transaction, or Income

7 b. Amount.

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed

On

8/15/05
Date

408 353-1992
Telephone Number